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T. S. Reptel
PATENT 4-17

Attorney Docket No.: FOM-117.01

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Russell, Melanie et al.
Application No: 09/846,899
Filed: May 1, 2001
For: Dynamic Performance Measures

Examiner: Not Yet Assigned
Art Unit: 2121

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OCT 16 2002
Technology Center 2100

INFORMATION DISCLOSURE STATEMENT
UNDER 37 CFR 1.97

Commissioner for Patents
Washington, DC 20231

Sir:

Submitted herewith on Form PTO-1449/A is a listing of one document known to Applicants and/or their attorney in compliance with the requirements of 37 CFR 1.56. A Copy of the document is also being submitted. This submission is provided before a first office action on the merits.

Although we believe that we have appropriately provided for any fees due in connection with this submission, the Commissioner is authorized to credit any overpayment or charge any deficiencies to/from our **Deposit Account No. 06-1448, Reference FOM-117.01.**

Should there be any questions after reviewing this paper, the Examiner is invited to contact the undersigned at (617) 832-1241.

Respectfully Submitted,

Kevin A. Oliver
Reg. No. 42,049

Date: October 7, 2002

Customer No: 25181
Patent Group
Foley, Hoag LLP
World Trade Center West
155 Seaport Boulevard
Boston, MA 02210-2600

OIPF JCT09
OCT 15 2002
U.S. PATENT & TRADEMARK OFFICE

2121

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

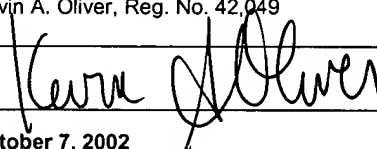
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/846,899
	Filing Date	May 1, 2001
	First Named Inventor	Russell, Melanie
	Group Art Unit	2121
	Examiner Name	Not Yet Assigned
Attorney Docket Number		FOM-117.01

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ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement by Applicant (Form 1449A) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Information Disclosure Statement Under 37 CFR 1.97; Reference AA; Certificate of First Class Mail; and Return Receipt Postcard.
Remarks <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Customer No. 25181	
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Kevin A. Oliver, Reg. No. 42,049	
Signature		
Date	October 7, 2002	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.



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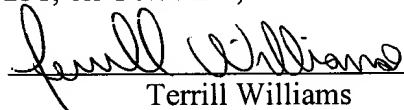
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CERTIFICATE OF FIRST CLASS MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail, postage prepaid, in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231, on October 7, 2002.


Terrill Williams

Commissioner for Patents
Washington, DC 20231

Sir:

Submitted herewith are:

1. Transmittal Form (1 pg.);
2. Fee Transmittal (1 pg.);
3. Information Disclosure Statement By Applicant (Form 1449A) (1 pg.);
4. Reference AA;
5. Information Disclosure Statement Under 37 CFR 1.97 (1 pg.); and
6. Return Receipt Postcard.



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Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) 0

Complete if Known

Application Number 09/846,899
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First Named Inventor Russell, Melanie, et al.
Examiner Name Not Yet Assigned
Group / Art Unit 2121
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METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge any additional fees or credit any over payments to:

Deposit
Account
Number

06-1448, Ref. FOM-117.01

Deposit
Account
Name

Foley Hoag LLP

- ☐ Applicant claims small entity status.
See 37 CFR 1.27

2. ☐ Payment Enclosed:

☐ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

SUBTOTAL (1)

(\$) 0

2. EXTRA CLAIM FEES

Total Claims		** =	Extra Claims	X	Fee from below	=	Fee Paid
Independent Claims		** =	0	X		=	0
Multiple Dependent				X		=	0

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)

(\$) 0

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

Fee Code	Large Entity Fee (\$)	Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet.	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17 (q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify) Change in Status

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$)

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Kevin A. Oliver	Registration No. (Attorney/Agent)	42,409	Telephone	(617) 832-1241
Signature				Date	October 7, 2002

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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